



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Business Regulation
INSURANCE DIVISION
233 Richmond Street, Suite 233
Providence, RI 02903-4233

TEL #: (401) 222-2223
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October 17, 2005 Original
May 24, 2006 Revision

To: INDIVIDUAL(S) RESPONSIBLE FOR STATE FILINGS

From: Kenneth R. DiLeone
Senior Insurance Examiner

RE: Summary of Annual and Quarterly Filing Requirements for 2006,
Life, Accident and Health Insurance (L&H) Companies
(All companies filing on the NAIC L&H Annual Statement blank)

Domestic and foreign L&H Companies should review the following attached pages:

- The NAIC's "General Instructions" for L&H Companies;
- The NAIC's "Life, Accident and Health Insurers Checklist", annotated for filing in R.I.;
- The R.I. Insurance Division's "Notes and Instructions";
- The R.I. Insurance Division's "Special Reporting Requirements" (most L&H Companies need to respond only to Special Report Requirements #1 and #7; note that this year, the absence of a report filed in response to requirement #7 will be deemed to be a "NONE" report; Accredited and Approved Reinsurers may ignore this page totally); and
- The R.I. Insurance Division's "Contracted Producer Report" (also available on-line at: http://www.dbr.state.ri.us/pdf_forms/cprbull_exb.pdf).

FOREIGN L&H Companies are required to submit to the R.I. Insurance Division (or to the R.I. Division of Taxation for premium tax payments), on or before the due dates indicated, only those nine items listed in the Checklist, Section V - State Required Filings.

- Do NOT file a printed copy of the Annual Statement nor any Separate Accounts Statement;
- Do NOT file a PDF-formatted version of those statements on CD-ROM;
- DO send Premium Tax report and payment separately to the Division of Taxation;
- R.I. Renewal/Filing Fees, due 04/01/06, should NOT be included with the above filings; our invoice will be mailed to the company on or about 03/01/06.

DOMESTIC L&H Companies are required to submit the following items to the R.I. Insurance Division (or to the R.I. Division of Taxation for premium tax payments), on or before the dates indicated:

- **03/01/06:** A complete Annual Statement, a Separate Account Statement (if appropriate), on paper as well as in PDF format on CD-ROM, and a Risk-Based Capital Report, with original signatures on Jurat Pages; a copy of the Checklist with Column 1 completed; and any NAIC Supplements or R.I.-Required Filings listed in Sections II or V of the Checklist as due on this date.

Send Premium Tax reports and payments to the Division of Taxation.

- **04/01/06:** Any NAIC Supplements, on paper as well as in PDF format on CD-ROM; and any R.I.-Required Filings listed as due on this date, including payment of R.I. Filing Fees due as per our 03/01/06 invoice.
- **05/15/06:** A Quarterly Statement, with original signatures on the Jurat Page, on paper as well as in PDF format on CD-ROM. This filing requirement repeats on **08/15/06** and **11/15/06**.
- **06/01/06:** Audited Financial Statements, on paper as well as in PDF format on CD-ROM; and, if appropriate, a Credit Life, Accident & Health report due on this date.
- Each domestic L&H Company must also file electronically with the NAIC via CD-ROM, diskette, or the Internet as part of the NAIC's total filing requirements.

Whether a domestic or foreign L&H Company, please read "Notes and Instructions" before submitting any material. Thank you in advance for your cooperation. Feel free to contact me directly at (401) 222-5477, or by FAX at (401) 222-5475, or by e-mail at Ken_DiLeone@dbr.state.ri.us if you have any questions regarding these filing requirements.

NAIC's General Instructions For Companies to Use Checklist

Please Note: This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will send mailing labels and other information to all companies, but will not be sending their own checklist this year.

Electronic filing is intended to include filing via the Internet or via CD with the NAIC. Companies that file with the NAIC via the Internet are not required to submit diskettes to the NAIC.

Column (1) (Checklist)

This column provides the company a method for marking completed forms or filings. Place an "X" next to each item included.

Column (2) (Line #)

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) (Required Filings)

Name of item or form to be filed.

The **Annual Statement Electronic Filing** includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The **March .PDF Filing** is the .pdf file for annual statement data, detail for investment schedules, and supplements due March 1.

The **Risk-Based Capital Electronic Filing** includes all risk-based capital data.

The **Separate Accounts Electronic Filing** includes the separate accounts annual statement and investment schedule detail.

The **Separate Accounts .PDF Filing** is the .pdf file for the separate accounts annual statement and all investment schedule detail.

The **Supplemental Electronic Filing** includes all supplements due April 1, per the *Annual Statement Instructions*.

The **Supplement .PDF Filing** is the .pdf file for all supplemental schedules and exhibits due April 1.

The **Quarterly Electronic Filing** includes the quarterly statement data.

The **Quarterly .PDF Filing** is the .pdf for quarterly statement data.

The **June .PDF Filing** is the .pdf file for the Audited Financial Statements.

Column (4) (Number of Copies)

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail, if such investment schedule data is available to the

states via the NAIC database. The checklists reflect this action taken by the Blanks (EX4) Task Force. "XXX" appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. **Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.**

Column (5) (Due Date)

Indicates the date on which the company must file the form.

Column (6) (Form Source)

This column contains one of three words: "NAIC," "State," or "Company." If this column contains "NAIC," the company must obtain the forms from the appropriate vendor. If this column contains "State," the state will provide the forms with the filing instructions (generally on its web site). If this column contains "Company," the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*.

Column (7) (Applicable Notes)

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes before submitting a filing.

LIFE, ACCIDENT AND HEALTH INSURERS CHECKLIST

COMPANY NAME: _____ **NAIC Company Code:** _____

Contact: _____ **Telephone:** _____

REQUIRED FILINGS IN THE STATE OF: ***Rhode Island*** **Filings Made During the Year 2006**

(1) Check-list	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
			Domestic		Foreign			
			State	NAI C	State			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 1/2"x14")	1	1	xxx	3/1	NAIC	Note L
	1.1	Printed Investment Schedule detail (Pages E01-E25)	1	1	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")	1	1	xxx	5/15, 8/15, 11/15	NAIC	
	3	Separate Accounts Annual Statement (8 1/2"x14")	1	1	xxx	3/1	NAIC	
		II. NAIC SUPPLEMENTS						
	10	Accident & Health Policy Experience Exhibit	1	1	xxx	4/1	NAIC	
	11	Credit Insurance Experience Exhibit	1	1	xxx	4/1	NAIC	
	12	Interest Sensitive Life Insurance Products Report	1	1	xxx	4/1	NAIC	
	13	Investment Risk Interrogatories	1	1	xxx	4/1	NAIC	
	14	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit	1	1	xxx	4/1	NAIC	
	15	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit Adjustment Form	1	1	xxx	4/1	NAIC	
	16	Long Term Care Experience Reporting Forms	1	1	xxx	4/1	NAIC	
	17	Management Discussion & Analysis	1	1	xxx	4/1	Company	
	18	Medicare Supplement Insurance Experience Exhibit	1	1	xxx	3/1	NAIC	
	19	Risk-Based Capital Report	1	1	xxx	3/1	NAIC	
	20	Schedule SIS		N/A	N/A	3/1	NAIC	
	21	Statement of Actuarial Opinion	1	1	xxx	3/1	Company	
	22	Statement on non-guaranteed elements - Exhibit 5 Int. #3	1	1	xxx	3/1	Company	
	23	Statement on par/non-par policies – Exhibit 5 Int. 1.1	1	1	xxx	3/1	Company	
	24	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	
	25	Supplemental Schedule O	1	1	xxx	3/1	NAIC	
	26	Trusted Surplus Statement	1	1	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	27	Workers' Compensation Carve Out Supplement	1	1		3/1	NAIC	
		III ELECTRONIC FILING REQUIREMENTS						
	30	Annual Statement Electronic Filing	xxx	1	xxx	3/1	NAIC	
	31	March .PDF Filing	1	1	xxx	3/1	NAIC	Note O
	32	Risk-Based Capital Electronic Filing	xxx	1	N/A	3/1	NAIC	
	33	Separate Accounts Electronic Filing	xxx	1	xxx	3/1	NAIC	
	34	Separate Accounts .PDF Filing	1	1	xxx	3/1	NAIC	Note O
	35	Supplemental Electronic Filing	xxx	1	xxx	4/1	NAIC	
	36	Supplemental .PDF Filing	1	1	xxx	4/1	NAIC	Note O
	37	Quarterly Electronic Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
	38	Quarterly .PDF Filing	1	1	xxx	5/15, 8/15, 11/15	NAIC	Note O
	39	June .PDF Filing	1	1	xxx	6/1	NAIC	Note O
		IV. AUDITED FINANCIAL STATEMENTS						
	51	Accountants Letter of Qualifications	1	N/A	N/A		Company	
	52	Audited Financial Statements	1	1	xxx	6/1	Company	
	53	Audited Financial Statements Exemption Affidavit	1	N/A	N/A		Company	
	54	Independent CPA	1	N/A	N/A		Company	
	55	Notification of Adverse Financial Condition	1	N/A	N/A		Company	
	56	Report of Significant Deficiencies in Internal Controls	1	N/A	N/A		Company	
	57	Request for Exemption to File	1	N/A	N/A		Company	
		V. STATE REQUIRED FILINGS						
	101	Certificate of Compliance	xxx	0	1	3/1	State	
	102	Certificate of Deposit	xxx	0	1	3/1	State	
	103	Certificate of Valuation	xxx	0	1	3/1	State	
	104	Filings Checklist (with Column 1 completed)	1	1	1	3/1	State	
	105	Premium tax (R.I.G.L. §44-17-1)	1	0	1	3/1	State	Note D
	106	State Filing Fees	1	0	1	4/1	State	Note C
	107	Signed Jurat	xxx	xxx	1	3/1	NAIC	Note L
	108	Contracted Insurance Producer Repost (R.I.G.L. §27-2.4-4)	1	0	1	3/1	Company	
	109	Credit Life/Accident & Health Filing (R.I. Ins. Reg. 9)	1	0	1	6/1	Company	

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and the NAIC and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state.

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.

NOTES AND INSTRUCTIONS
(A-L APPLY TO ALL FILINGS)

A	Required Filings Contact Person:	Kenneth DiLeone or Matt DiMaio E-mail: Ken_DiLeone@dbr.state.ri.us Phone: (401) 222-5477 E-mail: Mdimaiio@dbr.state.ri.us Phone: (401) 222-5454
B	Mailing Address:	R.I. Insurance Division 233 Richmond Street, Suite 233 Providence, RI 02903-4233
C	Mailing Address for Filing Fees:	<u>Do NOT send fees prior to receipt of renewal invoice.</u> Invoices will be mailed on March 1 st ; payment is due April 1 st . Mailing address is the same as that for Note B.
D	Mailing Address for Premium Tax Payments:	R.I. Division of Taxation, Corporate Taxes Section 1 Capitol Hill E-mail: eflanagan@tax.state.ri.us Providence, RI 02908 Phone: (401) 222-1120
E	Delivery Instructions:	All items must be postmarked no later than the indicated due date. If that due date falls on a weekend or a holiday, then that due date is extended to the next business day.
F	Late Filings:	Insurance companies will be fined \$100 per day for late filing pursuant to R.I.G.L. §27-12-1(c).
G	Original Signatures:	<u>Domestic</u> insurers: Original signatures required for all filings. <u>Foreign</u> insurers: Facsimile signatures accepted as per the NAIC's "Annual Statement Instructions."
H	Signature/Notarization/Certification:	The CEO, President, Secretary, and Treasurer are expected to sign the Jurat Page; those signatures must be notarized.
I	Amended Filings:	Amended items should be filed within 10 days of their amendment, along with an explanation of the amendments. If there are signature requirements for the original filing, same should be followed for any amendment.
J	Exceptions from normal filings:	<u>Domestic</u> insurers: Extensions, when necessary, may be requested in accordance with R.I.G.L. §27-12-1(c). <u>Foreign</u> insurers: File copy of domestic extension approval.
K	Bar Codes (State or NAIC)	Please follow the NAIC's "Annual Statement Instructions."
L	Signed Jurat	<u>Foreign</u> insurers must complete and file one printed copy for each company; do NOT file a printed copy of the annual statement, nor a PDF-formatted version on CD-ROM.
M	NONE Filings:	Please follow the NAIC's "Annual Statement Instructions."
N	State of Rhode Island Information	<u>Foreign</u> insurers: Pursuant to Rhode Island General Law §27-2-1.1, all insurers' doing business in RI are required to provide a toll free number or to accept collect calls from RI Residents.
O	Electronic Filing Requirements	All annual, quarterly and supplemental filings in .PDF format should be submitted on CD-ROM.

**DEPARTMENT OF BUSINESS REGULATION
INSURANCE DIVISION
RHODE ISLAND SPECIAL REPORTING REQUIREMENTS**

- Fraternal Organizations must respond to #1 only.
- Life Insurers should respond to #1 and #7 only.
- Property and Casualty Insurers should respond to all reports, #1 through #8.
- Surplus Lines Carriers should respond to #4 only.
- Health Insurers (aka HMOs, or HMDIs), Risk Retention Groups, Title Companies and Accredited or Approved Reinsurers are exempted from the filing requirements listed on this page.

NOTES for Reporting Requirements 2 through 8: Special forms do not exist for those reports. It is suggested that the company file the required report(s) on company letterhead; the absence of a filed report will be deemed to be a "NONE" report.

- 1. Contracted Insurance Producer Report:** **Due March 1**
Companies contracting with insurance producers are required to file an annual report regarding those producers, and pay appropriate fees. See R.I. General Laws (R.I.G.L.) §27-2.4-4 and the Contracted Producer Report (attached, and also available on-line at: http://www.dbr.state.ri.us/pdf_forms/cprbull_exb.pdf) for detailed reporting requirements. Companies with no reportable business must file a "NONE" report. For any questions, contact Molly Champagne-Seward, Licensing Coordinator at 401-222-5456.
- 2. Professional Liability Insurance Report:** **Due March 1**
Insurers writing liability insurance for health care professionals, dentists, or dental hygienists are required to file an annual report regarding that activity. See R.I.G.L. §42-14-2.1(c) for detailed reporting requirements. Please reply to Teresa DeLuca, Property & Casualty Section.
- 3. Assigned Risk Plan Report:** **Due April 1**
Insurers participating in an Automobile Liability and/or Physical Damage Assigned Risk are required by R.I.G.L. §31-33-8 to file an annual report of the total amount of premiums written and total losses incurred during the most recent calendar year in such plan(s). Please reply on an individual company basis, under separate cover to Kenneth R. DiLeone, Senior Insurance Examiner.
- 4. Liquor Liability Report:** **Due April 1**
Insurers writing liquor liability insurance are required by R.I.G.L. §3-14-14 to file an annual report of the total number of policies and dollar amount of premiums written, and the number and amount of claims paid under Liquor Liability Insurance policies. Please reply on an individual company basis, under separate cover to Matt DiMaio, Principal Licensing Insurance Examiner.
- 5. Workers' Compensation Annual Report (R.I.G.L. §27-7.1-7.2):** **Due May 15**
R.I. Insurance Regulation 54, Section 4 enumerates filing requirements. Please reply on an individual company basis, under separate cover, to Eugene Daigneault, Senior Field Auditor.
- 6. Automobile Insurance Annual Report (R.I.G.L. §27-9-55):** **Due May 15**
R.I. Insurance Regulation 74, Section 4 enumerates filing requirements. Please reply on an individual company basis, under separate cover, to Teresa DeLuca, Property & Casualty Section.
- 7. Credit Life/Accident & Health Filing (R.I. Insurance Regulation IX)** **Due June 1**
See Regulation 9, Section 9, which enumerates filing requirements. Please submit on an individual company basis, under separate cover, to the Life, A & H Section of this Division.
- 8. Workers' Compensation & Employers' Liability Excess Profits Report:** **Due July 1**
Each insurance group writing workers' compensation and/or employers' liability insurance is required by R.I.G.L. §27-9-51(a) to file an annual excess profit report on the form prescribed by the Department. Please reply to Eugene Daigneault, Senior Field Auditor.

PLEASE FORWARD TO APPROPRIATE AREAS WITHIN YOUR COMPANY

R.I. Laws and Regulations may be obtained from NILS Publishing at (800) 423-5910
R.I. Laws are also available on-line at: <http://www.rilin.state.ri.us/Statutes/Statutes.html> , and
R.I. Insurance Regulations are available at: http://www.dbr.state.ri.us/rules_regs/id_rules.html



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TDD No. (401) 222-2999

2005 Contracted Producer Report– Due March 1, 2006

R.I. Gen. Laws § 27-2.4-4 requires all insurance companies contracting with insurance producers (individuals and/or business entity) to provide to the Department on March 1 of each year, along with fees due (\$25 per individual producer and/or business entity paid more than \$100 in commissions for business written in Rhode Island), a written report of their contracted insurance producers for the prior calendar year. Companies must submit a report which lists the producer name and/or business entity, license number and/or federal tax id number of each resident and nonresident producer which the company paid at least one hundred dollars (\$100.00) in commissions for business written in Rhode Island during 2005, together with a \$25.00 fee for each individual and/or business entity reported. **Please use the following format for reporting:**

Insurance Company Name _____

NAIC #: _____ Tax ID #: _____

Name of Individual(s) and/or Business Entity that Received at least \$100.00 in Commissions during 2005	License No. or Fed. Tax ID No.
1.	
2.	
3.	
4.	
5.	
6.	
(...)	
Total number of Contracted producers ____ x \$25.00 =(total fees due). Check made payable to General Treasurer, State of R.I., must be attached to report.	

I certify that the above report lists all producers, both individuals and business entity, to which the above company paid at least one hundred dollars (\$100.00) of commission for business written in Rhode Island for calendar year 2005.

NAME AND TELEPHONE NUMBER

Please note that even if you have no producers, you are still required to file a “NONE” report. ALL licensed companies must submit this report by March 1, 2006, except HMDIs, HMOs, Surplus Line Carriers, Risk Retention Groups, Title Companies, and Approved or Accredited Reinsurers.

NOTE: For the purpose of this report, companies are not required to maintain a copy of the current producer's license.